## THE LAW OFFICES OF SALZMAN & WINER, LLP.

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June 23, 2015

## VIA ECF

Justice Sandra L. Townes, U.S.D.J. United States District Court 225 Cadman Plaza East Brooklyn, NY 11201

Re: Brown v. Marriott International, Inc. Docket No.: 14 CV 5960 (SLT) (MDG)

Handling Attorneys: Alan C. Salzman, Mitchell G. Shapiro and Harvey Winer

## Dear Judge Townes:

Kindly accept this supplement to our 6/8/15 letter (27). Annexed find a blank MARRIOTT ROOM RATE DISCOUNT AUTHORIZATION FORM (Exhibit "A"). Plaintiff used such a discount in connection with her St. Kitts Marriott Hotel stay—the "associate" was her relative Laryn Greenwood. By its terms defendant MII would discount the room rate at the St. Kitts Marriott Hotel, which discount, documents the extent to which defendant MII, manages, and operates and controls the St. Kitt's Marriott Hotel.

Very truly yours, SALZMAN & WINER, LLP.

Mitchell G. Shapiro, Esq.

MJ

MGS/mc Encl.

cc: Daniel M. Stewart

WHITE FLEISCHNER & FINO, LLP.

Attorneys for Defendant

61 Broadway

New York, NY 10006

EXHIBIT "A"



Room Rate Discount Authorization Form	
According to Company policy, presentation of this Authorization Form entitles the below-named individual to receive the Associate Room Rate or Friends and Family Rate on a space available basis at participating marriott International operated and franchised lodging or Marriott Vacations Worldwide Corporation properties globally. The Associate Room Rate is limited to a maximum of two rooms per night. These discounted rates are for personal travel only.	
Accommodations at the discounted rate are requested for:	
Spouse or Domestic Partner of Associate Child of Associate Child of Associate Parent or Parent-in-Law of Associate or Parent of Domestic Partner Brother or Sister of Associate (only for stays at Courtyard, Fairfield Inn, Residence Inn, SpringHill Suites and TownePlace Suites properties) Friends and Family Rate	
and the second	(Name of Guest)
Note: Associates must use the current year's Associate Discount Card.  This Authorization Form expires 60 days after the issue date.	
TERMS AND CONDITIONS OF THE ROOM RATE DISCOUNT PROGRAM BENEFIT	
Falsification or other misrepresentation of information on this Authorization Form will constitute grounds for	
immediate termination of the associate semployment.	
check in and may not be used by anyone order than the damones and may not be used by	
be completed for each property visited.  3. Photo identification and this Authorization Form are required at the time of check-in.	
Photo identification and this Adminization of the Adminisation of the Adminisatio	
Credit must be established at the time of check-in.     Associates and immediate family members will receive the Associate Room Rate for personal travel     Associates and immediate family members will receive the Associate Room Rate for personal travel	
<ol> <li>Associates and immediate family members will receive the Associate Room Rate for personal travel (not business). Associates traveling on business who receive the Associate Room Rate for personal travel put their hotel, division, or franchise at risk of losing the associate room rate discount benefit for all their</li> </ol>	
put their notal, division, or franchise at tisk of losing the secondary for well as those associates.	
associates. Use of the Room Rate Discount is a privilege. Your conduct and professionalism (as well as those persons in your party) as a guest is a representation of Matriott and affiliated companies and their persons in your party) as a guest is a representation of Matriott and affiliated companies and their associates. Any inappropriate conduct or behavior as a guest in a participating hotel will be dealt with as misconduct in connection with the associate's employment. Any conduct or behavior deemed inappropriate by the management of the hotel where you are a guest could result in the associate receiving disciplinary action, loss of room discount privileges, written warnings, and possible termination of	
employment.	
By requesting this room discount benefit, I accept and agree to abide by the terms and conditions outlined	
above.	
(Name of Associate)	(Associate's Employee ID)
Issued By:	
teaner pl.	
(Name of Manager)	(Manager's Email Address)
frame or man-gary	
(Business Unit/Department/Location)	
	(Inches Parks)
(Manager's Phone Number)	(Issue Date)